

I. (a) PLAINTIFFS (Check box if you are representing yourself <input type="checkbox"/>) Michelle Albahae, et.al		DEFENDANTS (Check box if you are representing yourself <input type="checkbox"/>) Olaplex Holdings Inc., et.al				
(b) County of Residence of First Listed Plaintiff Broward Co., FL <i>(EXCEPT IN U.S. PLAINTIFF CASES)</i>		County of Residence of First Listed Defendant Santa Barbara Co <i>(IN U.S. PLAINTIFF CASES ONLY)</i>				
(c) Attorneys (Firm Name, Address and Telephone Number) If you are representing yourself, provide the same information. David E. Rosen (SBN 155385) / Murphy Rosen, LLP 100 Wilshire Blvd., Suite 1300 Tel: 310-899-3300 Santa Monica, CA 90401-1142 FAX: 310-399-7201		Attorneys (Firm Name, Address and Telephone Number) If you are representing yourself, provide the same information.				
II. BASIS OF JURISDICTION (Place an X in one box only.)		III. CITIZENSHIP OF PRINCIPAL PARTIES -For Diversity Cases Only (Place an X in one box for plaintiff and one for defendant)				
<input type="checkbox"/> 1. U.S. Government Plaintiff	<input type="checkbox"/> 3. Federal Question (U.S. Government Not a Party)	Citizen of This State <input type="checkbox"/> PTF 1 <input type="checkbox"/> DEF 1 Incorporated or Principal Place of Business in this State <input type="checkbox"/> PTF 4 <input type="checkbox"/> DEF 4				
<input type="checkbox"/> 2. U.S. Government Defendant	<input checked="" type="checkbox"/> 4. Diversity (Indicate Citizenship of Parties in Item III)	Citizen of Another State <input checked="" type="checkbox"/> PTF 2 <input type="checkbox"/> DEF 2 Incorporated and Principal Place of Business in Another State <input type="checkbox"/> PTF 5 <input checked="" type="checkbox"/> DEF 5				
		Citizen or Subject of a Foreign Country <input type="checkbox"/> PTF 3 <input type="checkbox"/> DEF 3 Foreign Nation <input type="checkbox"/> PTF 6 <input type="checkbox"/> DEF 6				
IV. ORIGIN (Place an X in one box only.)						
<input checked="" type="checkbox"/> 1. Original Proceeding	<input type="checkbox"/> 2. Removed from State Court	<input type="checkbox"/> 3. Remanded from Appellate Court	<input type="checkbox"/> 4. Reinstated or Reopened	<input type="checkbox"/> 5. Transferred from Another District (Specify)	<input type="checkbox"/> 6. Multidistrict Litigation - Transfer	<input type="checkbox"/> 8. Multidistrict Litigation - Direct File
V. REQUESTED IN COMPLAINT: JURY DEMAND: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Check "Yes" only if demanded in complaint.)						
CLASS ACTION under F.R.Cv.P. 23: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No MONEY DEMANDED IN COMPLAINT: \$ _____						
VI. CAUSE OF ACTION (Cite the U.S. Civil Statute under which you are filing and write a brief statement of cause. Do not cite jurisdictional statutes unless diversity.)						
VII. NATURE OF SUIT (Place an X in one box only).						
OTHER STATUTES	CONTRACT	REAL PROPERTY CONT.	IMMIGRATION	PRISONER PETITIONS	PROPERTY RIGHTS	
<input type="checkbox"/> 375 False Claims Act	<input type="checkbox"/> 110 Insurance	<input type="checkbox"/> 240 Torts to Land	<input type="checkbox"/> 462 Naturalization Application	Habeas Corpus:	<input type="checkbox"/> 820 Copyrights	
<input type="checkbox"/> 376 Qui Tam (31 USC 3729(a))	<input type="checkbox"/> 120 Marine	<input type="checkbox"/> 245 Tort Product Liability	<input type="checkbox"/> 463 Alien Detainee		<input type="checkbox"/> 830 Patent	
<input type="checkbox"/> 400 State Reapportionment	<input type="checkbox"/> 130 Miller Act	<input type="checkbox"/> 290 All Other Real Property	<input type="checkbox"/> 465 Other Immigration Actions		<input type="checkbox"/> 835 Patent - Abbreviated New Drug Application	
<input type="checkbox"/> 410 Antitrust	<input type="checkbox"/> 140 Negotiable Instrument			TORTS PERSONAL PROPERTY	<input type="checkbox"/> 840 Trademark	
<input type="checkbox"/> 430 Banks and Banking	<input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment		<input type="checkbox"/> 370 Other Fraud		<input type="checkbox"/> 880 Defend Trade Secrets Act of 2016 (DTSA)	
<input type="checkbox"/> 450 Commerce/ICC Rates/Etc.	<input type="checkbox"/> 151 Medicare Act		<input type="checkbox"/> 371 Truth in Lending	SOCIAL SECURITY	<input type="checkbox"/> 861 HIA (1395ff)	
<input type="checkbox"/> 460 Deportation	<input type="checkbox"/> 152 Recovery of Defaulted Student Loan (Excl. Vet.)		<input type="checkbox"/> 380 Other Personal Property Damage		<input type="checkbox"/> 862 Black Lung (923)	
<input type="checkbox"/> 470 Racketeer Influenced & Corrupt Org.	<input type="checkbox"/> 153 Recovery of Overpayment of Vet. Benefits		<input type="checkbox"/> 385 Property Damage Product Liability		<input type="checkbox"/> 863 DIWC/DIWW (405 (g))	
<input type="checkbox"/> 480 Consumer Credit	<input type="checkbox"/> 160 Stockholders' Suits		<input type="checkbox"/> 390 Marine	BANKRUPTCY	<input type="checkbox"/> 864 SSID Title XVI	
<input type="checkbox"/> 485 Telephone	<input type="checkbox"/> 190 Other Contract		<input type="checkbox"/> 395 Marine Product Liability		<input type="checkbox"/> 865 RSI (405 (g))	
<input type="checkbox"/> Consumer Protection Act	<input type="checkbox"/> 195 Contract Product Liability		<input type="checkbox"/> 400 Motor Vehicle	CIVIL RIGHTS	FEDERAL TAX SUITS	
<input type="checkbox"/> 490 Cable/Sat TV	<input type="checkbox"/> 196 Franchise		<input type="checkbox"/> 405 Motor Vehicle Product Liability		<input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant)	
<input type="checkbox"/> 850 Securities/Commodities/Exchange			<input type="checkbox"/> 410 Other Personal Injury		<input type="checkbox"/> 871 IRS-Third Party 26 USC 7609	
<input type="checkbox"/> 890 Other Statutory Actions			<input type="checkbox"/> 415 Personal Injury-Med Malpractice	LABOR		
<input type="checkbox"/> 891 Agricultural Acts			<input checked="" type="checkbox"/> 365 Personal Injury-Product Liability			
<input type="checkbox"/> 893 Environmental Matters			<input type="checkbox"/> 367 Health Care/Pharmaceutical			
<input type="checkbox"/> 895 Freedom of Info. Act			<input type="checkbox"/> 370 Personal Injury			
<input type="checkbox"/> 896 Arbitration			<input type="checkbox"/> 375 Personal Injury-Med Malpractice			
899 Admin. Procedures			<input type="checkbox"/> 380 Asbestos			
Act/Review of Appeal of Agency Decision			<input type="checkbox"/> 385 Personal Injury-Product Liability			
950 Constitutionality of State Statutes			<input type="checkbox"/> 390 Other Personal Injury			
			<input type="checkbox"/> 395 Product Liability			
			<input type="checkbox"/> 400 Disabilities- Employment			
			<input type="checkbox"/> 405 Disabilities-Other			
			<input type="checkbox"/> 410 Education			
			<input type="checkbox"/> 415 Family and Medical Leave Act			
			<input type="checkbox"/> 420 American with Disabilities-Other			
			<input type="checkbox"/> 425 American with Disabilities-Other			
			<input type="checkbox"/> 430 Accommodations			
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FOR OFFICE USE ONLY:

Case Number:

VIII. VENUE: Your answers to the questions below will determine the division of the Court to which this case will be initially assigned. This initial assignment is subject to change, in accordance with the Court's General Orders, upon review by the Court of your Complaint or Notice of Removal.

QUESTION A: Was this case removed from state court? If "no," skip to Question B. If "yes," check the box to the right that applies, enter the corresponding division in response to Question E, below, and continue from there. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE CASE WAS PENDING IN THE COUNTY OF:		INITIAL DIVISION IN CACD IS:	
	<input type="checkbox"/> Los Angeles, Ventura, Santa Barbara, or San Luis Obispo		Western	
	<input type="checkbox"/> Orange		Southern	
	<input type="checkbox"/> Riverside or San Bernardino		Eastern	
QUESTION B: Is the United States, or one of its agencies or employees, a PLAINTIFF in this action? If "no," skip to Question C. If "yes," answer Question B.1, at right. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	B.1. Do 50% or more of the defendants who reside in the district reside in Orange Co.? <i>check one of the boxes to the right</i> →		YES. Your case will initially be assigned to the Southern Division. <input type="checkbox"/> Enter "Southern" in response to Question E, below, and continue from there.	
			NO. Continue to Question B.2.	
	B.2. Do 50% or more of the defendants who reside in the district reside in Riverside and/or San Bernardino Counties? (Consider the two counties together.) <i>check one of the boxes to the right</i> →		YES. Your case will initially be assigned to the Eastern Division. <input type="checkbox"/> Enter "Eastern" in response to Question E, below, and continue from there.	
			NO. Your case will initially be assigned to the Western Division. <input type="checkbox"/> Enter "Western" in response to Question E, below, and continue from there.	
QUESTION C: Is the United States, or one of its agencies or employees, a DEFENDANT in this action? If "no," skip to Question D. If "yes," answer Question C.1, at right. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.1. Do 50% or more of the plaintiffs who reside in the district reside in Orange Co.? <i>check one of the boxes to the right</i> →		YES. Your case will initially be assigned to the Southern Division. <input type="checkbox"/> Enter "Southern" in response to Question E, below, and continue from there.	
			NO. Continue to Question C.2.	
	C.2. Do 50% or more of the plaintiffs who reside in the district reside in Riverside and/or San Bernardino Counties? (Consider the two counties together.) <i>check one of the boxes to the right</i> →		YES. Your case will initially be assigned to the Eastern Division. <input type="checkbox"/> Enter "Eastern" in response to Question E, below, and continue from there.	
			NO. Your case will initially be assigned to the Western Division. <input type="checkbox"/> Enter "Western" in response to Question E, below, and continue from there.	
QUESTION D: Location of plaintiffs and defendants?		A. Orange County	B. Riverside or San Bernardino County	C. Los Angeles, Ventura, Santa Barbara, or San Luis Obispo County
Indicate the location(s) in which 50% or more of <i>plaintiffs who reside in this district</i> reside. (Check up to two boxes, or leave blank if none of these choices apply.)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Indicate the location(s) in which 50% or more of <i>defendants who reside in this district</i> reside. (Check up to two boxes, or leave blank if none of these choices apply.)		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D.1. Is there at least one answer in Column A? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "yes," your case will initially be assigned to the SOUTHERN DIVISION. Enter "Southern" in response to Question E, below, and continue from there. If "no," go to question D2 to the right. →		D.2. Is there at least one answer in Column B? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "yes," your case will initially be assigned to the EASTERN DIVISION. Enter "Eastern" in response to Question E, below. If "no," your case will be assigned to the WESTERN DIVISION. Enter "Western" in response to Question E, below.		
QUESTION E: Initial Division?		INITIAL DIVISION IN CACD		
Enter the initial division determined by Question A, B, C, or D above: →		Western		
QUESTION F: Northern Counties?				
Do 50% or more of plaintiffs or defendants in this district reside in Ventura, Santa Barbara, or San Luis Obispo counties? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

IX(a). IDENTICAL CASES: Has this action been previously filed **in this court?**

NO

YES

If yes, list case number(s): _____

IX(b). RELATED CASES: Is this case related (as defined below) to any civil or criminal case(s) previously filed **in this court?**

NO

YES

If yes, list case number(s): _____

Civil cases are related when they (check all that apply):

- A. Arise from the same or a closely related transaction, happening, or event;
- B. Call for determination of the same or substantially related or similar questions of law and fact; or
- C. For other reasons would entail substantial duplication of labor if heard by different judges.

Note: That cases may involve the same patent, trademark, or copyright is not, in itself, sufficient to deem cases related.

A civil forfeiture case and a criminal case are related when they (check all that apply):

- A. Arise from the same or a closely related transaction, happening, or event;
- B. Call for determination of the same or substantially related or similar questions of law and fact; or
- C. Involve one or more defendants from the criminal case in common and would entail substantial duplication of labor if heard by different judges.

X. SIGNATURE OF ATTORNEY

(OR SELF-REPRESENTED LITIGANT): /s/ David E. Rosen

DATE: 02/09/2023

Notice to Counsel/Parties: The submission of this Civil Cover Sheet is required by Local Rule 3-1. This Form CV-71 and the information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. For more detailed instructions, see separate instruction sheet (CV-071A).

Key to Statistical codes relating to Social Security Cases:

Nature of Suit Code	Abbreviation	Substantive Statement of Cause of Action
861	HIA	All claims for health insurance benefits (Medicare) under Title 18, Part A, of the Social Security Act, as amended. Also, include claims by hospitals, skilled nursing facilities, etc., for certification as providers of services under the program. (42 U.S.C. 1935FF(b))
862	BL	All claims for "Black Lung" benefits under Title 4, Part B, of the Federal Coal Mine Health and Safety Act of 1969. (30 U.S.C. 923)
863	DIWC	All claims filed by insured workers for disability insurance benefits under Title 2 of the Social Security Act, as amended; plus all claims filed for child's insurance benefits based on disability. (42 U.S.C. 405 (g))
863	DIWW	All claims filed for widows or widowers insurance benefits based on disability under Title 2 of the Social Security Act, as amended. (42 U.S.C. 405 (g))
864	SSID	All claims for supplemental security income payments based upon disability filed under Title 16 of the Social Security Act, as amended.
865	RSI	All claims for retirement (old age) and survivors benefits under Title 2 of the Social Security Act, as amended. (42 U.S.C. 405 (g))